

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28894

FILED
Feb 11, 2005
Secretary of State

Entity Name: VENETIAN HARMONY CHAPTER OF SWEET ADELINES INTERNATIONAL, INC.

Current Principal Place of Business:

303 KENSINGTON STREET
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

Current Mailing Address:

303 KENSINGTON STREET
PORT CHARLOTTE, FL 33954

New Mailing Address:

FEI Number: 59-2409715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRENIER, GLORIA L
4211 CASCADE FALLS DR.
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VERNEY, JUDITH
Address: 999 INLET CIR., #102D
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: NANFITO, POLLY A
Address: 1470 APPIAN DRIVE
City-St-Zip: PUNTA GORDA, FL 33950

Title: D () Delete
Name: MANVILLE, NANCY
Address: 1251 NORTH BASIN LANCE
City-St-Zip: SARASOTA, FL 34242

Title: D () Delete
Name: KING, MARTHA
Address: 2085 SANDHILL LANE
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: GRENIER, GLORIA
Address: 3728 SURREY LANE
City-St-Zip: SARASOTA, FL 34235

Title: D () Delete
Name: ROBERTS, LINDA
Address: 1434 ROOSEVELT DR.
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLORIA GRENIER

D

02/11/2005

Electronic Signature of Signing Officer or Director

Date